

ENGLISH LANGUAGE LEARNER FORMS

ELL Boot Camp 2013

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ELL Forms





State of Arizona
Department of Education
Office of English Language Acquisition Services

**Primary Home Language Other Than English (PHLOTE)
Home Language Survey**
(Effective April 4, 2011)

These questions are in compliance with Arizona Administrative Code, R7-2-306(B)(1), (2)(a-c).

Responses to these statements will be used to determine whether the student will be assessed for English Language Proficiency.

1. What is the primary language used in the home regardless of the language spoken by the student? _____
2. What is the language most often spoken by the student? _____
3. What is the language that the student first acquired? _____

Student Name _____ Student ID _____

Date of Birth _____ SAIS ID _____

Parent/Guardian Signature _____ Date _____

District or Charter _____

School _____

Please provide a copy of the Home Language Survey to the ELL Coordinator/Main Contact on site.

In SAIS, please indicate the student's home or primary language.



State of Arizona
Department of Education
Office of English Language Acquisition Services

**20__ - 20__ Parental Notification and Consent Form
for Student Placement in an English Language Learner (ELL) Program**

To the parent or guardian of _____
Last Name First Name MI. SAIS ID

Student I.D. School Grade

Your student's English proficiency has been measured using the *Arizona English Language Learner Assessment (AZELLA)*. The results of this assessment show that your student is at the "limited English proficiency" level, and qualifies for placement in a language instruction educational program.

English language learner programs adjust instruction to the student's strengths and needs. Instructional strategies, practices, and methods to help each student learn English and meet age appropriate academic standards are based upon scientific research. The expectations for the English language learners (ELLs) are to fully transition into mainstream classes, meet appropriate academic achievement standards for grade promotion, and to graduate from high school at the same rate as mainstream students. The teachers of special education ELLs will meet with the special education personnel to ensure that the objectives of the Individual Education Plans are incorporated into classroom instruction.

The status of your student's academic achievement is: (circle one) **below grade level** **at grade level** **above grade level**

Your child has been placed in one of the following:

- _____ Structured English Immersion Program*
_____ Mainstream Classroom (English Language Learner on Individual Language Learner Plan - ILLP)*
_____ Bilingual Education Program with required waiver*

*See the attached LEA program description as defined by A.R.S. § 15-751 through § 15-753.

Description includes methodology, content, instruction, goals, use of English and a native language in instruction, how the program will meet the educational strengths and needs of their student, and the rate of transition to mainstream classrooms.

A student must meet the following criteria in order to achieve English language proficiency and exit the program: a proficient Total Combined Score, a proficient score in the reading domain, and a proficient score in the writing domain. A.R.S. § 15-756.05

Parents have the right to decline their student's enrollment in or to have their student immediately removed from an ELL program.

If you would like more information about the programs or instruction, or assistance in selecting a program, please contact your child's school.

Signature of classroom teacher/language arts teacher Date

Signature of parent or legal guardian Date

Parental Notification and Consent Forms must be sent home within 30 days of the beginning of each school year or within two weeks of a student registering during the school year. 20 U.S.C. § 7012(a)(d)

This form should be placed in the student's cumulative folder.

(Revised: July 2013)



State of Arizona
Department of Education
Office of English Language Acquisition Services

Parent Request for Student Withdrawal from an English Language Learner Program

Student Name _____ SAIS ID _____
Last Name First Name M.I.
Student ID _____ Current School _____ Grade _____

As the parent or legal guardian of the above named student, I am exercising my right to request that my student be removed from his/her designated English Language Learner program (Structured English Immersion or Bilingual Education). I have discussed any alternative educational options with my student's teacher and/or principal and I am requesting that the student be placed in a mainstream, non-English Language Learner classroom. It is my belief that this course of instruction is better suited for my student's needs and therefore, I consent to a mainstream classroom placement. While I have withdrawn my child from English language services, I understand that his/her progress in English language acquisition will continue to be monitored and assessed with the language assessment (AZELLA) until he/she scores proficient.

Signature of parent or legal guardian _____ Date _____

FOR OFFICE USE ONLY

Current Arizona English Language Learner Assessment Proficiency Levels:

Reading _____ Writing _____ Total Combined _____

By signing, I acknowledge that I have discussed the alternative educational options with the parent/legal guardian and I agree to place the student according to the parent/legal guardian's wishes.

Principal's Signature _____ Date _____

As provided by the No Child Left Behind Act [P.L. 107-110, Title III, Sec. 3302, (8) (A) (i and ii)].

(Revised: May 2012)

Parental Waiver Application

This form is used by parents to request an alternative to English Language Education, as specified in A.R.S. §15-753. Parents or legal guardians of an English learner must complete this application annually per A.R.S. §15-752.

| | | | |
|----------------------------------|---|----------------------|-------------------|
| District Name _____ | | School Name _____ | Student ID# _____ |
| Parent/Guardian Last Name _____ | | First Name _____ | |
| Child's Last Name _____ | First Name _____ | Middle Initial _____ | |
| Address _____ | | | |
| City _____ | State AZ | Zip Code _____ | |
| Native Language of Student _____ | School year for which the waiver is requested _____ | Grade _____ | |

- I have personally visited my child's school.
- I have been provided with a full description of the educational materials to be used in the different educational program choices and all the educational opportunities available to my child.
- I am applying for a waiver to remove my child from an English language or Sheltered English Immersion classroom placement.

Reason for waiver request (to be verified by school district): The student has met at least one (1) of the three (3) circumstances for which a parental exception waiver may be applied (A.R.S. §15-753). At least one of the following circumstances must be checked:

- ☐ **Waiver 1 (A.R.S. §15-753B.1)** My child already knows English: the child already possesses good English language skills, as measured by oral evaluation or standardized tests of English vocabulary comprehension, reading, and writing, in which the child scores approximately at or above the state average for his/her grade level or at or above the 5th grade average, whichever is lower; or,
- ☐ **Waiver 2 (A.R.S. §15-753B.2)** My child is 10 years or older: it is the informed belief of the school principal and educational staff that an alternate course of educational study would be better suited to the child's overall educational progress and rapid acquisition of basic English language skills as documented by the analysis of individual student needs; or,
- ☐ **Waiver 3 (A.R.S. §15-753B.3)** My child has special individual needs: the child already has been placed for a period of not less than thirty calendar days during this school year in an English language classroom and it is subsequently the informed belief of the school principal and educational staff that the child has such special and individual physical or psychological needs, above and beyond the student's lack of English proficiency, that an alternate course of educational study would be better suited to the student's overall educational development and rapid acquisition of English. A written description of no less than 250 words documenting these special individual needs for the specific child must be provided and permanently added to the child's official school records and the waiver application must contain the original authorizing signatures of both the school principal and the local superintendent of schools.

I understand that I must apply for this waiver on an annual basis. I was fully informed of my right to refuse to agree to this waiver.

Signature of Parent/Legal Guardian

Date

Signature of School Principal

Date

Signature of Superintendent (Required Only for Waiver #3)

Date

- ☐ Application
Granted
- ☐ Application
Rejected

► LEA: The signed and completed form with test results or basis for determination shall be kept on file by the LEA.



State of Arizona
Department of Education
Office of English Language Acquisition Services

Notification of Reclassification

Dear Parent/Guardian:

(Student Name) _____
was reassessed with the Arizona English Language Learner Assessment (AZELLA)
on _____ (Date).

He/She has obtained an "Overall Proficient Level" on the AZELLA. This means that he/she no longer needs ELL program services. While your child has attained fluent English proficient status, his/her academic progress will be monitored for the next two years.

If you have any questions or concerns, please contact:

District/School Representative @ Phone

ELL Coordinator/Assessment Administrator Signature

Date

Copy: Student's cumulative file



State of Arizona
Department of Education
Office of English Language Acquisition Services

Two-Year Monitoring Form for Fluent English Proficient Students

Student Name _____

SAIS ID Number _____

Date Reclassified _____

Assessment data used to monitor progress of Fluent English Proficient (FEP) students

| | | Year 1 | | Year 2 | |
|---|-----------|-----------|------------|-----------|------------|
| | Test Name | Test Date | Test Score | Test Date | Test Score |
| State-wide | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| District-wide, School-wide | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Other criteria used for monitoring the FEP student. Classroom teacher comments. | | Year 1 | | Year 2 | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Student is eligible for Compensatory Instruction _____ Year 1 _____ Year 2

Monitor's Signature-Year One _____

Monitor's Signature-Year Two _____



State of Arizona
Department of Education

AZELLA Placement Test - Teacher Referral Form

This form must be used to refer a student for AZELLA Placement testing when an AZELLA Placement Test is not required.

Date _____ Student Name _____ SAIS # _____

District _____ School _____ Grade _____

Moving from ELL Services to Mainstream

- ☐ Student is currently receiving ELL services or is eligible for ELL services. If the student receives an Overall Proficiency Level of "Proficient" on the AZELLA Placement Test, the student shall be transferred to a mainstream classroom at the first appropriate opportunity.

A student in this circumstance must have "Intermediate" or "Proficient" on his/her most recent AZELLA test for the scores identified below and must regularly demonstrate English language proficiency in the classroom. Identify the student's most recent AZELLA test date and scores.

Most recent AZELLA test date _____

Overall Proficiency Level

Total Combined Proficiency Level

Reading Proficiency Level

Writing Proficiency Level

☐ Intermediate

☐ Intermediate

☐ Intermediate

☐ Intermediate

☐ Proficient

☐ Proficient

☐ Proficient

Teacher's justification, including classroom, school-wide, or district-wide assessment information, for referring student for an AZELLA Placement Test:

Testing in this circumstance is permitted at **either** the start of the school year **or** at mid-year but not at both times. If the retesting is to occur at the start of the school year, the AZELLA Placement Test may not be administered earlier than two weeks prior to the start of the school year nor later than two weeks after the student's enrollment. If the retesting is to occur at mid-year, the AZELLA Placement Test may be administered only during scoring cycle specified in the AZELLA Reference Manual.

Parental notification before administering the AZELLA Placement Test is encouraged but not required.

Signature Referring Teacher _____

Date _____

Signature ELL Coordinator _____

Date _____

Signature AZELLA Test Coordinator _____

Date _____

AZELLA Placement Test Result

AZELLA Overall Proficiency Level _____ Test Date _____

Classroom Placement: ☐ Mainstream ☐ SEI ☐ ILLP ☐ Bilingual



State of Arizona
Department of Education

AZELLA Placement Test - Teacher Referral Form

This form must be used to refer a student for AZELLA Placement testing when an AZELLA Placement Test is not required.

Date _____ Student Name _____ SAIS # _____

District _____ School _____ Grade _____

Moving from Mainstream to ELL Services

- ☐ Student is currently in a mainstream classroom and is not eligible for ELL services. If the student receives an Overall Proficiency Level below "Proficient" on the AZELLA Placement Test, the student shall be transferred into ELL services at the first appropriate opportunity.

A student in this circumstance may never have been tested on AZELLA because all PHLOTE questions were answered with English or may have a previous "Proficient" AZELLA score. There must be evidence that the student is having difficulties in the classroom based on a lack of English language proficiency that cannot be adequately addressed with appropriate differentiated instruction in a mainstream classroom. Such evidence should include assessment results, classroom performance, or documentation of interrupted schooling. For monitored FEP students, attach the student's monitoring form.

Teacher's justification for referring student for an AZELLA Placement Test:

Parent Conference is required. Parent(s)/Guardian(s) must agree to an AZELLA Placement Test and placement in ELL services if the student scores below "Proficient."

Signature Parent(s)/Guardian(s) _____ Date _____

Signature Referring Teacher _____ Date _____

Signature ELL Coordinator _____ Date _____

Signature AZELLA Test Coordinator _____ Date _____

AZELLA Placement Test Result

AZELLA Overall Proficiency Level _____ Test Date _____

Classroom Placement: ☐ Mainstream ☐ SEI ☐ ILLP ☐ Bilingual



Arizona Department of Education
Office of English Language Acquisition Services

Parental Notification of English Language Learner (ELL)
Achievement Determination

As required by NCLB (No Child Left Behind), Sec. 3302, (b)

Date _____

This notification is to inform you that your child's school district did not meet its Annual Measurable Achievement Objectives (AMAOs). This means that not enough students within the ELL program made adequate progress to meet the objectives set forth by state and federal requirements.

The State has defined English language learner achievement targets that are used to evaluate the effectiveness of language instruction. Each school year, school districts must provide the State with annual English language learner proficiency scores which are analyzed to gauge a program's effectiveness. These scores, in addition to state assessment scores (AIMS and TerraNova) determine whether the district has met the AMAOs set forth by state and federal requirements.

This letter is only meant to inform you of the district's determination. The district will take the necessary measures needed for improvement.

**ELL Compensatory Instruction for English Language Development
Written Individualized Compensatory Plan (WICP)**

Student Name (Last, First): _____ Date: _____

School: _____ School Year: _____

Grade: _____ SAIS Number: _____ Primary Home Language: _____

Student's overall AZELLA proficiency level upon entry into compensatory instruction program: (circle one)

Pre-Emergent Emergent Basic Intermediate Proficient

Teacher(s) providing compensatory instruction: _____

Types of Compensatory Instruction to be provided to this ELL or recent FEP student and related dates:

Extended day classes _____ Date started: _____ Date ended: _____

Summer school _____ Date started: _____ Date ended: _____

Intersession _____ Date started: _____ Date ended: _____

Individual instruction _____ Date started: _____ Date ended: _____

Small group instruction _____ Date started: _____ Date ended: _____

Other programs _____ Date started: _____ Date ended: _____

Measurable annual goal(s):

Instructional objectives targeted to improve English proficiency:

1. _____

2. _____

3. _____

Assessments used in Compensatory instruction program to measure progress:

1. _____

2. _____

3. _____

Teacher providing Compensatory Instruction _____ Date _____

Parent _____ Date _____ Principal _____ Date _____

Note: A WICP form is required for each student participating in a Compensatory Instruction Program. This form must be kept in the student's cumulative file. (R7-2-306(F)(4))

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Overview

The Office of English Language Acquisition Services (OELAS) is committed to providing guidance, assistance, and support to all of Arizona's school districts and charter schools charged with the educational needs of Arizona's English language learner (ELL) population by... -more-

What's New:

- 2013 OELAS Conference Registration
- Summer Professional Development
- 2013 ELL Teacher of the Year
 - Nomination Form
 - Kindergarten Data Template
 - Elementary Data Template
 - Middle/HS Data Template
- 2013 ELL Student Success Stories Nomination Form
- OELAS ELL Connections Newsletter

Hot Topics:

- SDELL70 Report Relocated
- SEI Budget - 2013-2014
- Directive Regarding the AZELLA Resolution Agreement

OELAS Website At-A-Glance:

- Announcements / Memorandums
- Arizona English Language Learner Assessment (AZELLA)
- Arizona English Language Learners Task Force
- Arizona State Board of Education Approved SEI Endorsement Training
- Articles of Interest and Useful Links
- English Language Learner (ELL) Forms
- ILLP Implementation Documents
- Monitoring Documents and Information

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| 2013 | | | | | | | | | | | | | |
| | | | | | | | | | | | | 1 | |
| 2 | 3 | 4 | 5 | 6 | 7 | 8 | | | | | | | |
| 9 | 10 | 11 | 12 | 13 | 14 | 15 | | | | | | | |
| 16 | 17 | 18 | 19 | 20 | 21 | 22 | | | | | | | |
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English Language Learner (ELL) Forms

ELL Forms for Student Files

- Home Language Survey
 - [\(In English\)](#) [\(In Spanish\)](#)
- Parental Notification
 - [\(In English\)](#) [\(In Spanish\)](#) – **Updated**
- Parent Request for Student Withdrawal
 - [\(In English\)](#) [\(In Spanish\)](#) – **Updated**
- Bilingual Program Waiver Request Form
 - [\(In English\)](#) [\(In Spanish\)](#)
- Parent Notification for ELL After Reclassification (ELLAR)
 - [\(In English\)](#) [\(In Spanish\)](#)
- AZELLA Placement Test – Teacher Referral Form
 - [Moving from ELL Services to Mainstream](#)
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ELL Sample Forms

The Arizona Department of Education, Office of English Language Acquisition Services has developed these forms for use by the LEAs. These were created as samples and can be used by the LEA, or the LEA can create one for their own use.

- [Sample AMAO Letter](#)
- Sample Notification of Reclassification Letter
 - [\(In English\)](#) [\(In Spanish\)](#) - **Updated**
- Sample Two-Year Monitoring Form for FEP Students
 - [\(In English\)](#) - **Updated**
- English Language Proficiency Assessment Attestation [Word](#) [PDF](#)
- Written Individualized Compensatory Plan (WICP) [Word](#) [PDF](#) - **Updated**

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